

Signature:___

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2017 SEP 13 AM 9: 12

	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction STATES DESIGNATION OF STATE			
	Wrangled Wreaths The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):			
				Caralee Edwards
	(Name)	(Address)		
	(Name)	(Address)		
		(Name)	(Address)	······································
	(Name)	(Address)		
3.	The general type of business transacted under the assumed business name is:			
	Retail TradeWholesale TradeServices	ConstructionAgricultureManufacturing	 Transportation and Public Utilities Mining Finance, Insurance, and Real Estate 	
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than # 4): Caralee Edwards			
	(Name)		(Name)	
	3176 Bryson Ave			
	(Address) Boise,	ID 83713	(Address)	
	(City)	(State) (Zipcode)	(City) (State) (Zipcode)	
Printed Name: Caralee Edwards			Secretary of State use only	
Signature: Challe Edward			IDAKO SECRETARY OF STATE	
Printed Name:			09/13/2017 05:00 CK:8129 CT:345545 BH:1602601	
			16 25.00 = 25.00 ASSUM NAME #2	
Printed Name:			D1970'S/	

Rev. 08/2015